

|                             |                         |              |                        |                                     |
|-----------------------------|-------------------------|--------------|------------------------|-------------------------------------|
| SERIAL NUMBER<br>09/150,200 | FILING DATE<br>09/08/98 | CLASS<br>435 | GROUP AND DATE<br>1622 | ATTORNEY DOCKET NO.<br>07257/017005 |
|-----------------------------|-------------------------|--------------|------------------------|-------------------------------------|

  

APPLICANT

MICHAEL KARIN, SAN DIEGO, CA; ANNING LIN, LA JOLLA, CA.

  
  

**\*\*CONTINUING DOMESTIC DATA\*\*\*\*\***

|          |                        |                         |           |
|----------|------------------------|-------------------------|-----------|
| VERIFIED | THIS APPLN IS A DIV OF | 08/799,913 02/13/97 PAT | 5,804,399 |
|          | WHICH IS A CON OF      | 08/444,393 05/19/95 PAT | 5,605,808 |
|          | WHICH IS A DIV OF      | 08/276,860 07/18/94 PAT | 5,593,884 |
|          | WHICH IS A CIP OF      | 08/220,602 03/25/94     |           |
|          | WHICH IS A CIP OF      | 08/094,533 07/19/93 PAT | 5,534,426 |

  

**\*\*371 (NAT'L STAGE) DATA\*\*\*\*\***

VERIFIED

\_\_\_\_\_

  
  

**\*\*FOREIGN APPLICATIONS\*\*\*\*\***

VERIFIED

\_\_\_\_\_

  
  

FOREIGN FILING LICENSE GRANTED 09/23/98

\*\*\*\*\* SMALL ENTITY \*\*\*\*\*

|   |                        |                      |                   |                         |
|---|------------------------|----------------------|-------------------|-------------------------|
| Foreign Priority claimed<br>35 USC 119 (e-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>Verified and Acknowledged <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY<br>CA | SHEETS DRAWING<br>26 | TOTAL CLAIMS<br>3 | INDEPENDENT CLAIMS<br>1 |
|---|------------------------|----------------------|-------------------|-------------------------|

ADDRESS

LISA A HAIL  
 FISH & RICHARDSON  
 4225 EXECUTIVE SQUARE  
 SUITE 1400  
 LA JOLLA CA 92037

TITLE

ONCOPROTEIN PROTEIN KINASE

|                                  |   |   |
|----------------------------------|---|---|
| FILING FEE RECEIVED<br><br>\$395 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>NO. _____ for the following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|----------------------------------|---|---|